

# FEC FORM 3X

## REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Republican National Coalition for Life Political Action Committee

ADDRESS (number and street) ▼

P.O. Box 618

☐ Check if different than previously reported. (ACC)

Alton

IL

62002

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00255406

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

### 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)

☐ July 15  
Quarterly Report (Q2)

☐ October 15  
Quarterly Report (Q3)

☐ January 31  
Year-End Report (YE)

☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)

☐ Termination Report  
(TER)

(b) Monthly  
Report  
Due On:

☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☒ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

11

06

2012

in the  
State of

IL

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

in the  
State of

5. Covering Period

10

01

2012

through

10

17

2012

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer JoAnn Jouett

Signature of Treasurer

JoAnn Jouett

[Electronically Filed]

Date

10

25

2012

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only

FEC FORM 3X  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Republican National Coalition for Life Political Action Committee

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
10 / 01 / 2012 To: M M / D D / Y Y Y Y Y Y  
10 / 17 / 2012

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">2012</span>		32728.41
(b) Cash on Hand at Beginning of Reporting Period.....	29829.51	
(c) Total Receipts (from Line 19) .....	1595.00	38096.10
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	31424.51	70824.51
7. Total Disbursements (from Line 31) .....	23500.00	62900.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	7924.51	7924.51
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

**Republican National Coalition for Life Political Action Committee**

Report Covering the Period:

From:

M M / D D / Y Y Y Y Y  
10 01 2012

To:

M M / D D / Y Y Y Y Y  
10 17 2012

**I. Receipts**

**COLUMN A**  
**Total This Period**

**COLUMN B**  
**Calendar Year-to-Date**

**11. Contributions (other than loans) From:****(a) Individuals/Persons Other**

Than Political Committees

**(i) Itemized (use Schedule A).....**

1300.00

18680.00

**(ii) Unitemized .....**

295.00

19416.10

**(iii) TOTAL (add**

Lines 11(a)(i) and (ii)..... ▶

1595.00

38096.10

**(b) Political Party Committees .....**

0.00

0.00

**(c) Other Political Committees**

(such as PACs).....

0.00

0.00

**(d) Total Contributions (add Lines**

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ..... ▶

1595.00

38096.10

**12. Transfers From Affiliated/Other**

Party Committees.....

0.00

0.00

**13. All Loans Received .....**

0.00

0.00

**14. Loan Repayments Received.....**

0.00

0.00

**15. Offsets To Operating Expenditures**

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

**16. Refunds of Contributions Made**

to Federal Candidates and Other

Political Committees.....

0.00

0.00

**17. Other Federal Receipts**

(Dividends, Interest, etc.).....

0.00

0.00

**18. Transfers from Non-Federal and Levin Funds****(a) Non-Federal Account**

(from Schedule H3).....

0.00

0.00

**(b) Levin Funds (from Schedule H5) .....**

0.00

0.00

**(c) Total Transfers (add 18(a) and 18(b))..**

0.00

0.00

**19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c))..... ▶**

1595.00

38096.10

**20. Total Federal Receipts**

(subtract Line 18(c) from Line 19) ..... ▶

1595.00

38096.10

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	23500.00	61500.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	1400.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	23500.00	62900.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	23500.00	62900.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	1595.00	38096.10
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	1595.00	38096.10
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	0.00	0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 6 OF 10

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Republican National Coalition for Life Political Action Committee**

Full Name (Last, First, Middle Initial)

## **A. Vance Drum**

Mailing Address 108 Lincolnshire

City

Crockett

State

TX

Zip Code

75835

FEC ID number of contributing  
federal political committee.

C

Name of Employer

TX Dept of Criminal Justice

Occupation

Chaplain

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 01 / 2012

**Transaction ID : SA11AI.5563**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

## **B. Paul Lauck**

Mailing Address 6535 Red Day Rd

City

Martinsville

State

IN

Zip Code

46151

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 01 / 2012

**Transaction ID : SA11AI.5564**

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

## **C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1300.00

1300.00

	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

Republican National Coalition for Life Political Action Committee

### A. ALLEN WEST FOR CONGRESS

Date of Disbursement

Transaction ID : SB23.5576

Amount of Each Disbursement this Period

ALLEN B MR. WEST

Category/  
Type

Disbursement For: 2012

☐ Primary ☒ General

☐ Other (specify) ▼

State: FL District: 18

## B. ANN MARIE BUERKLE FOR CONGRESS

Date of Disbursement

MM / DD / YYYY

City	State	Zip Code
SYRACUSE	NY	13214

Transaction ID : SB23.5575

### Purpose of Disbursement

Amount of Each Disbursement this Period

Candidate Name

ANN MARIE BUERKLE

Category/  
Type

Office Sought:	<input checked="" type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: 2012

☐ Primary ☒ General

☐ Other (specify) ▼

State: NY District: 25

Full Name (Last, First, Middle Initial)

### C. BACHMANN FOR CONGRESS

Date of Disbursement

MM / DD / YYYY

Mailing Address PO Box 25950

City	State	Zip Code
Woodbury	MN	55125

Transaction ID : SB23.5567

Purpose of Disbursement	
1	2
3	4
5	6
7	8
9	10
11	12
13	14
15	16
17	18
19	20
21	22
23	24
25	26
27	28
29	30
31	32
33	34
35	36
37	38
39	40
41	42
43	44
45	46
47	48
49	50
51	52
53	54
55	56
57	58
59	60
61	62
63	64
65	66
67	68
69	70
71	72
73	74
75	76
77	78
79	80
81	82
83	84
85	86
87	88
89	90
91	92
93	94
95	96
97	98
99	100

Amount of Each Disbursement this Period

5000.00

Candidate Name

MICHELE BACHMANN

Category/  
Type

Office Sought:	<input checked="" type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: 2012

☐ Primary ☒ General

☐ Other (specify) ▼

State: MN District: 06

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

6000.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 8 OF 10

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Republican National Coalition for Life Political Action Committee

Full Name (Last, First, Middle Initial)

**A. BERG FOR SENATE**

Mailing Address PO BOX 9394

City	State	Zip Code
FARGO	ND	58106

Purpose of Disbursement

Candidate Name

RICHARD A BERG

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

State: ND District: 00

Disbursement For: 2012

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2012

Transaction ID : SB23.5572

Amount of Each Disbursement this Period

1500.00
---------

Full Name (Last, First, Middle Initial)

**B. HELLER FOR SENATE**

Mailing Address PO BOX 371907

City	State	Zip Code
LAS VEGAS	NV	89137

Purpose of Disbursement

Candidate Name

DEAN HELLER

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

State: NV District: 00

Disbursement For: 2012

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2012

Transaction ID : SB23.5571

Amount of Each Disbursement this Period

1500.00
---------

Full Name (Last, First, Middle Initial)

**C. HOOSIERS FOR RICHARD MOURDOCK INC**

Mailing Address PO BOX 1583

City	State	Zip Code
INDIANAPOLIS	IN	46206

Purpose of Disbursement

Candidate Name

RICHARD E MOURDOCK

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

State: IN District: 00

Disbursement For: 2012

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2012

Transaction ID : SB23.5573

Amount of Each Disbursement this Period

1500.00
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SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

4500.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 9 OF 10

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Republican National Coalition for Life Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. King for Congress - 2012**Mailing Address 116 N Main St.  
PO Box 400

City Early State IA Zip Code 50535

Purpose of Disbursement

Candidate Name

**STEVE MR. KING**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IA District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2012

**Transaction ID : SB23.5566**

Amount of Each Disbursement this Period

5000.00
---------

Full Name (Last, First, Middle Initial)

**B. KOSTER FOR CONGRESS - 2012**

Mailing Address PO BOX 231

City ARLINGTON State WA Zip Code 98223

Purpose of Disbursement

Candidate Name

**JOHN M KOSTER**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: WA District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2012

**Transaction ID : SB23.5569**

Amount of Each Disbursement this Period

1500.00
---------

Full Name (Last, First, Middle Initial)

**C. LUNDBERG FOR CONGRESS COMMITTEE**

Mailing Address PO BOX 643

City LOVELAND State CO Zip Code 80539

Purpose of Disbursement

Candidate Name

**KEVIN LUNDBERG**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: CO District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2012

**Transaction ID : SB23.5570**

Amount of Each Disbursement this Period

1500.00
---------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

8000.00
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 10 OF 10

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Republican National Coalition for Life Political Action Committee

Full Name (Last, First, Middle Initial)

**A. NANCY JACOBS FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2012

Mailing Address 139 N MAIN STREET 201

WEYRICH CRONIN AND SORRA

City

BEL AIR

State

MD

Zip Code

21014

Purpose of Disbursement

Transaction ID : SB23.5574

Amount of Each Disbursement this Period

500.00
--------

Candidate Name

NANCY CAMP JACOBS

Category/  
Type

Office Sought:

☒

House

☐

Senate

☐

President

Disbursement For: 2012

☐

Primary

☒

General

☐

Other (specify) ▼

State: MD

District: 02

Full Name (Last, First, Middle Initial)

**B. TODD AKIN FOR SENATE**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2012

Mailing Address PO BOX 31222

City

ST LOUIS

State

MO

Zip Code

63131

Purpose of Disbursement

Transaction ID : SB23.5568

Amount of Each Disbursement this Period

4500.00
---------

Candidate Name

W TODD AKIN

Category/  
Type

Office Sought:

☐

House

☒

Senate

☐

President

Disbursement For: 2012

☐

Primary

☒

General

☐

Other (specify) ▼

State: MO

District: 00

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Mailing Address

City

State

Zip Code

Purpose of Disbursement

Amount of Each Disbursement this Period

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Candidate Name

Category/  
Type

Office Sought:

☐

House

☐

Senate

☐

President

Disbursement For:

☐

Primary

☐

General

☐

Other (specify) ▼

State:

District:

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

5000.00
---------

23500.00
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